DOCUMENT RESUME

ED 073 396 CG 007 834

AUTHOR	Gelso, Charles J.
TITLE	"Hey Wait a Minute, Let's Look at the Data!" The Effects of Recording on Counselors and Clients.
INSTITUTION	Maryland Univ., College Park. Counseling Center.
REPORT NO	RR-14-72
PUB DATE	72
NOTE	27p.
EDRS PRICE	MF-$0.65 HC-$3.29
DESCRIPTORS	*Counseling; Counseling Effectiveness; Counseling Services; *Inhibition; Phonotape Recordings; *Tape Recordings

ABSTRACT

Early research on the effects of audio recording on counselors and clients found no adverse effects, particularly on clients. This research fostered a set of beliefs about recording which is now being extrapolated to the area of video observation. Recent research, however, does suggest that audio and, in particular, video recording has an inhibitory effect on clients and counselors. The nature of these effects on clients has been found to depend on several client characteristics. While recording is not as inhibitory as clients expect it to be, counselors tend not to be sensitive to the inhibiting effects that do occur in their clients. Implications of recent research for counselors are examined. (Author)

ED 073396

COUNSELING CENTER

Office of Vice Chancellor for Student Affairs

UNIVERSITY OF MARYLAND

College Park, Maryland

CG 007 834

U.S. DEPARTMENT OF HEALTH
EDUCATION & WELFARE
OFFICE OF EDUCATION
THIS DOCUMENT HAS BEEN REPRODUCED EXACTLY AS RECEIVED FROM THE PERSON OR ORGANIZATION ORIGINATING IT. POINTS OF VIEW OR OPINIONS STATED DO NOT NECESSARILY REPRESENT OFFICIAL OFFICE OF EDUCATION POSITION OR POLICY

ED 073396

COUNSELING CENTER
UNIVERSITY OF MARYLAND
COLLEGE PARK, MARYLAND

" HEY WAIT A MINUTE, LET'S LOOK AT THE DATA!"

THE EFFECTS OF RECORDING ON COUNSELORS AND CLIENTS

Charles J. Gelso

Research Report # 14-72

"HEY WAIT A MINUTE, LET'S LOOK AT THE DATA!"

THE EFFECTS OF RECORDING ON COUNSELORS AND CLIENTS

Abstract

Early research on the effects of audio recording on counselors and clients found no adverse effects, particularly on clients. This research fostered a set of beliefs about recording which is now being extrapolated to the area of video observation. Recent research, however, does suggest that audio and, in particular, video recording has an inhibitory effect on clients and counselors. The nature of these effects on clients has been found to depend on several client characteristics. While recording is not as inhibitory as clients expect it to be, counselors tend not to be sensitive to the inhibiting effects that do occur in their clients. Implications of recent research for counselors are examined.

"HEY WAIT A MINUTE, LET'S LOOK AT THE DATA!"

THE EFFECTS OF RECORDING ON CLIENTS AND COUNSELORS

Counselors have made use of tape recording for over 30 years now. There seems to be general agreement that the first systematic recording program in counseling was begun at the Ohio State University in the early 1940's under the direction of Francis Robinson and Carl Rogers (Covner, 1942; Kogan, 1950). At that time Rogers (1942) discussed the advantages of recording for both the scientific study and the practice of counseling and therapy. His following statement appears applicable, even today:

> The use of these relatively new mechanical devices provides for the first time a sound basis for the investigation of therapeutic processes, and the teaching and improvement of psychotherapeutic techniques. Therapy need no longer be an intuitive gift. Psychotherapy can become a process based upon known and tested principles. The recording program here described has given us a beginning understanding of the basic elements of therapy, has opened the door to highly significant research, and has enabled us to train psychologists to become much more adequate as therapists [p. 434].

By the 1960's the audio recording of counseling interviews became standard practice, particularly in practicum supervision (Roberts & Renzaglia, 1965). In addition, the 1960's witnessed the advent of video recording, the use of which appears to be increasing to the point where it too will soon become common. This form of recording has many obvious

advantages over audio recording, both for counselor training and research (e.g., Ryan, 1969). In addition, there is some crude empirical data to suggest that video observation does facilitate the training of counselors (Eisenberg & Delaney, 1970; Poling, 1968; Walz & Johnson, 1963; Yenawine & Arbuckle, 1971). Also, some novel methods of using video procedures in the conduct of counseling have been proposed (Higgins, Ivey & Uhlemann, 1970; Kagan & Schauble, 1969; Kagan, Krathwohl & Miller, 1963), although a recent review of research raises questions about whether many such methods are truly helpful to clients (Bailey & Sowder, 1970).

Despite the obvious advantages of recording over non-recording and video over audio recording, it is a disturbing fact that, until very recently, an extreme dearth of research existed on the effects of various recording procedures on the counselor, the client and their interaction. Thus the counseling profession has run the risk of endorsing (due to testimonials more than solid research) a set of procedures without carefully examining their possible adverse effects.

The purpose of the present paper is to critically review the research that has been conducted on the effects of recording. Research activity on this topic seems to have occurred during two distinct time periods. The few early studies were conducted on the effects of audio recording during the 1940's and 1950's. This was followed by an absence of research for approximately a decade, after which a series of studies was conducted, this time on the effects of both audio and video recording. Because of this distinct time separation and because both the methodology and findings of these two series of investigations differ appreciably, early and recent

studies will be examined separately.

Early Studies

In the earliest investigation of the effects of recording, Covner (1942) sought to determine, through a questionnaire, reactions to audio recording of experienced and inexperienced (graduate student) counselors. Covner found that only 20 percent of the counselors exhibited what he considered to be undesirable reactions, and such reactions were even less frequent among experienced counselors. Curiously, however, Covner did not consider that the counselor's feeling "more conscious of techniques and more careful during every interview" because of recording could, at least in part, be a negative reaction. When counselors who checked this alternative are included in the "negative reaction" group, then almost 40 percent of the sample was negatively affected by recording.

Counseling lore would have it that recording is threatening to the counselor, since it provides a vehicle through which his colleagues and/or supervisors can evaluate him. The same lore, however, promotes the idea that recording does not affect clients much and if there is an effect it quickly dissipates (Gelso, 1973). This lore seems to have been promoted by three early studies. In the first such investigation (Kogan, 1950), four counselors conducted 61 initial interviews in a family service agency. The criteria in this study were patients' reactions to their counselors' requests to record the sessions, and the subjective opinions of the counselors about the impact of recording on their clients. None of the patients refused his counselor's request. In addition, counselors felt that any tension over recording quickly disappeared. It is notable that

when counselors asked their old clients for permission to record, however, they got much more negative responses (type and proportion unreported). This side finding suggests that the lack of overt resistance in new clients may be due to a compliance factor. That is, during the initial phase of help-seeking clients see themselves in a precarious position. Thus, they are likely to comply to counselor requests that would otherwise be refused. This interpretation is consistent with the informal observation of Gill, Newman and Redlich (1954) that only after the initial phase of therapy do clients raise objections to audio recording.

Harper and Hudson (1952) recorded all 15 initial interviews that took place during a designated time period in a marriage counseling agency. At the beginning of his sessions each client was asked by his counselor for permission to record for the aid it would give his counselor. Midway through the session the counselor turned off the recorder, indicating that he had all the information he would need on tape. Actually, the entire interview was taped by recorder in an adjoining room. It was found that 12 of the 15 clients agreed without question to the counselor's request to record and the remaining clients agreed after questions pertaining to confidentiality were answered. Four independent judges were unable to detect differences in clients' verbal behavior between the segments of sessions in which clients were aware of recording versus segments in which clients were unaware that recording was occurring. The authors concluded that client anxiety due to recording was in the minds of counselors. These conclusions seem dubious, however, because of serious methodological limitations in the study. The judges, for

example, simply listened to the tapes with no specified dimensions upon which to rate client behavior. In addition, judges appeared to be aware of the experimental conditions under which they were rating, thus introducing the strong possibility of bias in their ratings. Finally, as indicated above, client agreement to be recorded in an initial interview appears to be a questionable measure of whether recording will have an adverse effect.

Lamb and Mahl (1956) found that 60 percent of the 39 clients undergoing intake interviews in their study did not object to being recorded and did not bring the matter up again during the session; 20 percent raised initial doubts but did not bring the matter up again after being reassured of the confidentiality of the recording; 20 percent either refused or did bring up the matter again later in the session. In another part of the study it was found that a sizable proportion (43-58 percent, depending upon how the data was tabulated) of psychiatrists and psychiatric residents at an Eastern Medical school who had recorded interviews as part of their practice felt that recording affected their procedures. (Note the selection bias here in that only half the staff had done recording.) A similar percentage felt that recording affects clients in an initial interview and in long-term therapy, and that it increases resistance in therapy. A positive relationship was found between therapists' feeling inhibited by recording and their feeling that it adversely affected clients. The authors, in combining both parts of the study, concluded that therapists feel clients are bothered much more by recording than clients actually seem to be bothered, and that therapists may be projecting their own discomfort onto their clients.

Conclusions From Early Studies

The above studies have been described in some detail because they appear to be part and parcel of some firmly held counseling lore about the effects of recording. As Gelso (1973) has indicated, such lore would have it that (a) audio recording is much more disturbing to counselors than clients; (b) much if not all of the inhibition counselors think that audio recording produces in their clients is a projection of the counselor's own disturbance; (c) what little disruption audio recording causes in clients dissipates quickly, e.g., within a few minutes after a session begins. Finally, these beliefs are in the process of being extrapolated to the effects of video recording (e.g., Bergman, 1966; Ryan, 1969), despite the absence of data on that subject until very recently.

What may legitimately be concluded from the early studies described above? For one, a "sizable" proportion of counselors and therapists in the 1940's and 1950's felt that audio recording affected their behavior with clients. Secondly, about half the psychiatrists and psychiatric residents who had audio recorded therapy sessions at one medical school (which was heavily psychoanalytic) felt that such recording affected clients, both in an initial interview and long-term therapy. Thirdly, few clients will object to counselors' requests to audio record their sessions, particularly if the confidentiality of the recording is made explicit. (It is quite another matter, however, to conclude from this result that recording does not adversely affect clients.) Fourthly, counselors who themselves feel inhibited by audio recording are more likely to feel that clients are inhibited by it. (Again, it is highly

untenable to conclude from such a finding that what counselors view as disturbance in their clients due to recording is nothing but a projection of the counselor's own anxiety.) Finally, Harper and Hudson's experiment suggests that if audio recording does affect clients, the effect is not so powerful that it can be detected by judges without specific a priori dimensions upon which to rate client behavior. Simply listening to clients' verbalizations when they are aware recording and comparing these verbalizations to those made when clients were unaware of the recording will not allow judges to detect possible effects.

Moreover, a careful examination of the early research gives the impression that studies were designed to support the researchers' biases, e.g., that audio recording was a good thing and did not interfere with the counseling process. This phenomenon is most apparent from the researchers' interpretation of their results in light of the loose methodology which characterized the research.

Recent Research

At least six studies have been conducted on the effects of recording since the mid-1960's. According to standard criteria (e.g., Campbell & Stanley, 1963, p. 34), three of these studies qualify as true experiments, and they employ quantifiable criterion measures (Gelso, 1973; Roberts & Renzaglia, 1965; Tanney & Gelso, 1972). Two of the studies sought client opinions about the effects of recording (Gelso, 1973; Van Atta, 1969), a strategy which had not been employed in the early studies. Finally, three of the studies (Gelso, 1973; Tanney & Gelso, 1972; Van Atta, 1969) have for the first time examined the effects of video procedures on clients. The results of these recent investigations will

be presented and discussed below. This will be followed by a discussion of the implications of the research for counselors and counselor-educators.

General Effects of Recording

In what appears to be the first well-controlled and appropriately quantified experiment on recording, Roberts and Renzaglia (1965) compared clients' self-references when they were aware versus unaware that their interviews were audio recorded. It was found that when clients were aware of recording over a three-interview sequence they emitted more positive (favorable) self-references than when they were unaware that recording was being conducted. When they were unaware they emitted more negative self-references. This finding seems to imply that clients are more guarded or defensive when they are aware that their sessions are recorded.

A recent set of experiments does support the above "defensiveness" interpretation. These studies examined, for the first time, the effects of both audio and video recording (as against non-recorded or partially-recorded control groups). Gelso (1973) found that in a two-interview sequence both video and audio recording suppressed clients' self-exploration as rated by trained judges using Carkhuff's (1969) self-exploration scale. In addition clients whose two sessions were video recorded, as compared to those whose interviews were audio recorded for a few minutes (control group), reported a greater degree of inhibition in expressing personal feelings due to the type of recording made of their sessions. Tanney and Gelso's (1972) experiment revealed that in an initial interview a greater percentage of clients whose sessions were audio or video recorded reported feeling inhibited and blocked and a smaller percentage

reported feeling stimulated as compared to non-recorded controls. It is noteworthy that in the Gelso and Tanney-Gelso investigations video recording was nearly always found to elicit greater inhibition than audio recording, although the differences did not attain statistical significance until clients were studied according to the categories into which their problems fell (discussed below).

Finally, as indicated earlier, a long and firmly held belief among counselors and counselor educators is that if recording does have an adverse effect on clients this effect, (e.g., anxiety-inhibition) quickly disappears. Only one study (Gelso, 1973) examined this question, and it was found that when effects of audio and video recording did occur they did not attenuate over two counseling interviews. This finding is important because surveys indicate that most counseling does not persist beyond a few sessions (Blocher, 1968; Clark, 1966; Nugent & Pareis, 1968). Research is badly needed here to determine when, if ever, the effects do dissipate.

What about counselors? Are they also affected by recording? That recording would affect counselors' behavior would seem predictable, because counselors usually tape their sessions for supervisory purposes. Thus, the tapes allow careful scrutiny of the counselor by his colleagues and, even more frequently, his supervisors. In the only recent study on this topic Roberts and Renzaglia (1965) found that counselor-trainees were less client-centered when aware that their sessions were being audio recorded, despite the fact that their graduate training emphasized client-centered counseling. The investigators suggested that audio recording made it more difficult for these trainees to implement their client-

centered learning. They felt more compelled to be directive with clients.

The Myth of Anticipated Effects

Research discussed in the section above indicates that clients are adversely affected by recording. A survey by Van Atta (1969) of applicants for counseling at a university counseling center, however, suggests that the effects are not nearly as great as clients anticipate them being. Van Atta, for example, found that 95 percent of his subjects expected to feel either inhibited (76%) or controlled (19%) if their counseling was observed by visual methods when they were seeking help for personal problems. Tanney and Gelso, using the same criterion measure which Van Atta employed, found that after an initial interview only 60 percent of their personal-social clients whose sessions were video recorded reported feeling inhibited or controlled; 40 percent felt stimulated.

In essence, Van Atta found that visual methods of observing produced the most anticipated inhibition and non-recording the least (audio recording was intermediary). In addition, clients expected to be inhibited by observation moreso if they sought help with personal than either vocational or study problems. In all cases, these anticipated effects were greater than the actual effects found by Tanney and Gelso.

Van Atta's research may give us a few clues as to why counselors have so long maintained that recording does not disturb clients. For one, since clients are much less inhibited by recording than they expect to be, the actual effect may seem trivial. Secondly, Van Atta found that a sizable minority of his subjects could not imagine themselves entering counseling if the sessions were to be observed by visual methods. Thus, clients who are likely to be most disturbed by such methods may

never show up at agencies which acquire a reputation for using the methods. The serious implications of this finding need not be elaborated.

The Non-Effects Myth

Two possible explanations were presented above for the erroneous belief among many counselors and counselor-educators that recording does not affect clients. The study by Tanney and Gelso (1972) may provide an even more cogent reason. As indicated earlier, this study revealed that clients whose sessions were audio and, in particular, video recorded, were more likely to feel inhibited or blocked during counseling than those whose sessions were not recorded. This finding is consistent with results obtained when trained judges listened to tapes and when clients simply reported whether or not the recording inhibited them (Gelso, 1973). Yet when counselors rated client inhibition in the Tanney-Gelso study an almost opposite pattern emerged! The counselors (who were not aware of whether their clients were told the sessions would be audio, video, or non-recorded) actually felt that the smallest proportion of clients who were told by the researchers that their sessions would be video recorded were acting inhibited or blocked during counseling. This is a startling and paradoxical finding. That is, counselors' ratings of clients counseled under video recording were most favorable (more favorable than those counseled under audio or non-recording conditions). In attempting to explain this result, the authors suggested that the anxiety due to video recording is expressed in such a manner that it is responded to by counselors as if it was a result of the client's "opening up" or exploring himself to a high degree. Whatever the interpretation, these results cast doubt on the

wisdom of using personal testimonials by counselors and counselor-educators as support for the efficacy of new recording methods and, in particular, the absence of adverse effects on clients.

Moderators

Up to this point the effects of different methods of recording on clients in general have been examined. Surely recording does not affect all clients in the same manner. Or does it? Recent studies have uncovered three client variables which influence the effect of recording: problem type, personality, and sex.

Gelso (1973) found that both audio and video recording inhibited self-exploration in clients who sought counseling for help with educational-vocational problems, while only video recording inhibited clients with primarily personal problems. This result, corroborated by the Tanney and Gelso (1972) study, seems to indicate that personal-adjustment clients are less easily inhibited during counseling than are educational-vocational clients, i.e., a more exposing method of observation is required to inhibit them. This conclusion is contradictory to Van Atta's (1969) aforementioned finding that applicants for counseling expected to be more easily inhibited by recording when they were seeking help with personal problems as compared to vocational or study problems. Thus, when both studies are combined, it appears that personal adjustment clients expect to be more inhibited than other clients by recording but, in fact, they are less likely to be inhibited. An explanation of these findings may reside in differences between personal adjustment and educational-vocational clients with respect to motivational variables. It is possible that personal problems are experienced as more urgent or

affect-charged than the other problem types and, thus, are more resistent to inhibition. A really adequate explanation of these findings, however, must await additional research.

Consistent with the above motivational interpretation, it has been found that although inhibition due to recording tends to lower evaluations of counseling made by personal-adjustment clients, such inhibition does not affect the evaluations made by educational-vocational clients (Gelso, 1972, 1973). Thus, while a more exposing method of observation (video recording) is required to inhibit the self-exploration of personal-adjustment clients, such inhibition attenuates their satisfaction with their counseling experience. Conversely, educational-vocational clients are more easily inhibited, but such inhibition does not produce a less favorable evaluation of their counseling.

A second factor which has been found to moderate the effect of recording is the client's personality pattern (Gelso & Tanney, 1972). Using the Adjective Check List (Gough & Heilbrun, 1965) as a measure of personality, Gelso and Tanney found that clients who reported being most inhibited by audio recording in an initial interview tended to be highly controlled, self-denying and rigid individuals with strong feelings of inferiority. They were orderly, dependable and responsible, but at the expense of individuality and spontaneity.

While the above pattern was consistent for personal and educational-vocational clients, it was unexpectedly found that for clients with primarily educational-vocational problems, self-ratings of inhibition due to recording were positively related to "counseling readiness." The authors speculated that high readiness clients (i.e., anxious, worried

about themselves, preoccupied with their problems and pessimistic about their ability to solve them) who seek counseling for educational-vocational problems may actually have problems of a more "personal" nature with which they desire help, but are reluctant to admit this or are only dimly aware of it. Since such clients are reluctant to reveal their personal problems to begin with, recording tends to inhibit their expression of such problems more than with other clients.

Finally, Van Atta (1971) has found that female subjects, when asked to anticipate inhibition due to recording, expect to be more inhibited than males when discussing study problems. Thus, sex and problem category interact in influencing the effect of observation on client-subjects. Although this study is limited by the fact that it surveyed subjects (not clients) expectations rather than the actual effects of recording, it is the only investigation to date which has examined client sex as a potential moderator.

It is notable that none of the research on moderators has examined the counselor's role in determining whether or not recording affects clients adversely. Yet Carkhuff (1969) has hypothesized that certain counselor qualities (e.g., empathy, respect, genuineness) serve to minimize the negative impact of recording. Such an hypothesis is quite consistent with this author's subjective experiences in conducting some of the research reviewed in this paper. Suffice it to say that this is an area that warrants research attention.

Conclusions

Several conclusions about the effects of recording on counselors and clients seem warranted.

1. A client's consent to be recorded is probably a poor indication of whether or not he will be affected by the procedure. Nearly all clients will comply, especially when questions of confidentiality are dealt with by the counselor.

2. Recording does appear to suppress the self-exploration of clients in general. Clients tend to make more favorable statements about themselves when recorded, but this probably reflects a type of defensiveness on their part.

3. The inhibiting effects of recording on clients tend to persist across at least a few interviews. No studies have been done to examine when, if ever, the adverse effects of recording dissipate. Neither has research examined the effects of recording on the "ultimate" outcomes of counseling.

4. Clients expect recording to be much more inhibiting than it actually is. In addition, while personal-adjustment clients anticipate being more affected by recording than educational-vocational clients, they are in fact probably more resistant to inhibition. In addition, females anticipate being more inhibited by recording than do males, especially when study problems are the focus of counseling. The major adverse effect of clients' expectations is probably to reduce the chances of their seeking counseling from agencies with a reputation for recording.

5. The effect of recording on clients depends on the type of problems with which they seek help. Both video and audio recording appear to inhibit self-exploration in clients with primarily educational-vocational problems, while only video recording suppresses exploration in personal-adjustment clients.

6. When inhibited by recording, personal-adjustment clients feel more negatively about their counseling. Such inhibition, however, is not associated with the evaluations of counseling made by educational-vocational clients.

7. Relatively independent of problem type, certain client personality traits appear to be related to clients' self-reports of inhibition due to recording.

8. Counselors themselves tend to be affected by recording, at least when the counselors are being recorded for supervisory purposes. The effect may be to make counselor-trainees less free to implement what they have learned about counseling from their coursework.

9. Counselors tend to be insensitive to the effects of recording on their clients. In fact, there may be a tendency for counselors actually to interpret signs of inhibition as increased self-exploration or dis-inhibition.

A few additional points need to be amplified about the research presented in this paper. For one, the counselors in all recent studies except those on client expectations were graduate students in counseling. Thus it is not known if the effects of recording on clients as described above would occur in the same fashion if clients were being treated by experienced counselors. A second and related point is that recording *per se* is probably not what inhibits clients. In all recent recording research clients were either informed that recording was for the purpose of counselor supervision or not informed of the purposes. When this fact is integrated with earlier social psychological research (Wapner & Alper, 1952), it is likely that the "hidden audience" implicit in such

observation rather that the recording proper which elicits the inhibition. For example, the people who have access to the tapes or who directly observe the sessions are unknowns to the client and, as far as he is concerned, may be evaluating him in a quite negative manner. A third point is implicit in the first two points. It is likely that the findings in this paper apply to modes of observation other than recording, e.g., one-way mirror, observing through TV monitors without recording. This point is supported directly by Van Atta's (1969, 1971) findings that subjects and applicants for counseling anticipate being just as inhibited by one-way mirror observation as video recording. It is probably the mode of observation (e.g., visual, auditory) interacting with the "hidden audience" elements of observation, rather than the recording, that produces the effects discussed above. Finally, it should be clear that the conclusions which have been drawn in this paper are tentative. Adequately designed research has only very recently begun, and additional research is clearly needed.

Implications for Counselors

But what are the implications of all of this for counselors and counselor-educators? Should we simply discontinue recording, particularly video recording, since it tends to inhibit clients and in many cases makes them less satisfied with their counseling experience? This is probably best viewed as a cost-benefit question. That is, the benefits of recording and other forms of observation (e.g., for supervision) need to be weighed against the potentially adverse effects. When the research discussed in this paper is weighed against the many advantages

of recording, particularly in counselor training, it would seem foolish to conclude that we should stop recording. Rather, greater caution needs to be exercised in determining which clients can have their sessions recorded without disruption and in assessing what form of observation should be employed. It has been the author's experience that in many agencies counselor trainees record all interviews, giving the client little choice in whether or not sessions will be recorded. A typical method of implementing this policy is to tell the client that interviews are recorded, ask him if that is okay and then move off the subject quickly, even if the client displays ambivalence in his consent. This procedure may result in the counselors having a client (which he needs for practicum purposes), but the "termination-via-no-show" rate is probably quite high in such situations. A more feasible procedure would be to explore carefully the client's feelings about recording before a decision is made on whether or not to record. If after such exploration it is concluded that recording would be disruptive, and if the counselor is a student who is required to record, it would be the counselor's responsibility to refer the client directly to another agency whose counselors did not require recording. If the client consents after exploration, the counselor should let him know that he may feel free to bring the subject up again if the recording poses a problem for the client later in counseling.

With respect to the suggestions in the above paragraph, it is important to note that counselors need to thread a fine line between saying too much or too little about recording. Just where the happy medium is located would seem to be a function of a number of client characteristics. Heretofore, counselors have probably erred in the direction of saying too

little. In light of the research examined in this paper, it is likely that erring in the direction of saying too little serves the counselor's (and supervisor's) needs more than the client's needs.

A second procedure which may have merit is to make the "unknown audience" known to the client. Thus, the counselor's supervisor could, at a minimum, introduce himself to the client. More desirably, the supervisor could either conduct a preliminary counseling or intake session with the client or serve as a co-therapist with the supervisee for one or more session. It is proposed that such procedures would foster greater trust on the client's part and, accordingly, minimize the adverse effects of recording. Such a result would, of course, depend upon the supervisor's possessing qualities which engender trust.

The above procedures would seem to be useful in minimizing "recording inhibition." In light of the literature presented here, it behooves counselors and counselor-educators to explore additional procedures. At this point, however, simply enumerating procedures of unknown effectiveness would be of limited value. Suffice it to say that the new and highly promising methods we have developed to observe counseling also contain drawbacks and that counselors need to exercise much caution in utilizing such methods. In light of the evidence, the kind of unbridled enthusiasm reflected in the statement below seems unwarranted:

> The counselor education staff no longer feels bound to a campus practicum because local schools lack one-way vision rooms or facilities. Any office of 9 X 12 dimensions with a standard 110-volt outlet permits video taping. Counselor candidates are taping in all sections of our state with the local schools' approval. The response and enthusiasm with

> which the new equipment has been received demands that the profession give increased attention to this medium for counselor education [Ryan, 1969, pp. 128-129].

Alternatively, Carkhuff's (1966) proposal seems considerably more consistent with our current knowledge (and lack of it) about the effects of recording:

> Recording is used for many purposes--supervision, consultation, research, but some aspects of this are intolerable even though heard only by professional colleagues. Whether taped or not, the counselor serves for the purposes of the client and must be shaped by what is effective for the client, not what is effective for his colleagues. He must have full awareness of the effect of the tape recording upon both himself and the client [p. 471].

References

Bailey, K. G., & Sowder, W. T. Audiotape and videotape self-confrontation in psychotherapy. Psychological Bulletin, 1970, 74, 127-137.

Bergman, P. An experiment in filmed psychotherapy. In Gottschalk, L. A., & Auerbach, A. H. (Eds.), Methods of research in psychotherapy. New York: Appleton-Century-Crofts, 1966. Pp. 35-49.

Blocher, D. H. What can counseling offer clients: Implications for research and selection. In Whitely, J. M. (Ed.), Research in counseling. Columbus, Ohio: Charles E. Merrill, 1968. Pp. 5-20.

Campbell, D. T., & Stanely, J. C. Experimental and quasi-experimental designs for research. Chicago: Rand McNally, 1963.

Carkhuff, R. R. Counseling research, theory and practice--1965. Journal of Counseling Psychology, 1966, 13, 467-480.

Carkhuff, R. R. Helping and human relations, Volume 1, practice and research. New York: Holt, Rinehart & Winston, 1969.

Clark, D. D. Characteristics of counseling centers in large universities. Personnel and Guidance Journal, 1966, XLIV, 817-823.

Covner, B. J. Studies in phonographic recording of verbal material: 1. The use of phonographic recordings in counseling, practice and research. Journal of Consulting Psychology, 1942, 6, 105-113.

Eisenberg, S., & Delaney, D. J. Using video simulation of counseling for training counselors. Journal of Counseling Psychology, 1970, 17, 15-19.

Gelso, C. J. Inhibition due to recording and clients' evaluation of counseling. Psychological Reports, 1972, In Press.

Gelso, C. J. The effects of audio and video recording on client satisfaction and self-expression. Journal of Consulting and Clinical Psychology, 1973, In Press.

Gelso, C. J., & Tanney, M. F. Client personality as a mediator of the effects of recording. Counselor Education and Supervision, 1972, In Press.

Gill, M. M. Newman, R., & Redlich, F. C. The initial interview in psychiatric practice. New York: International Universities, 1954.

Gough, H. & Heilbrun, A. The Adjective Check List Manual. Palo Alto, Calif.: Consulting Psychologists Press, 1965.

Harper, R. A., & Hudson, V. W. The use of recordings in marriage counseling: A preliminary empirical investigation. Marriage and Family Living, 1952, 14, 332-334.

Higgens, W. H., Ivey, A. E., & Uhlemann, M.R. Media therapy: A programmed approach to teaching behavioral skills, Journal of Counseling Psychology, 1970, 17, 20-26.

Kagan, N., Krathwohl, D. R., & Miller, R. Stimulated recall in therapy using video tape--a case study. Journal of Counseling Psychology, 1963, 10, 237-243.

Kagan, N., & Schauble, P. G. Affect simulation in interpersonal process recall. Journal of Counseling Psychology, 1969, 16, 309-313.

Kogan, L. S. The electrical recording of social casework interviews. Social Casework, 1950, 31, 371-378.

Lamb, R. S., & Mahl, G. F. Manifest reactions of patients and interviewers to the use of sound recording in the psychiatric interview. American Journal of Psychiatry, 1956, 112, 731-740.

Nugent, F., & Pareis, N. Survey of the present policies and practices in college counseling centers in the United States of America. Journal of Counseling Psychology, 1968, 15, 94-97.

Poling, E. G. Video tape recording in counseling practicum: II--Critique considerations. Counselor Education and Supervision, 1968, 8, 33-38.

Roberts, R. R., & Renzaglia, G. The influence of tape recording in counseling. Journal of Counseling Psychology, 1965, 12, 10-16.

Rogers, C. R. The use of electrically recorded interviews in improving psychotherapeutic techniques. Journal of Orthopsychiatry, 1942, 12, 425-434.

Ryan, C. W. Video aids in practicum supervision. Counselor Education and Supervision, 1969, 8, 125-129.

Tanney, M. F., & Gelso, C. J. The effects of recording on clients. Journal of Counseling Psychology, 1972, In Press.

Van Atta, R. E. Excitatory and inhibitory effect of various methods of observation in counseling. Journal of Counseling Psychology, 1969, 16, 433-439.

Van Atta, R. E. Sex differences in response to anticipated observation: A research note. Unpublished manuscript, Southern Illinois University, 1971.

Walz, G. R., & Johnson, J. A. Counselors look at themselves on video tape. Journal of Counseling Psychology, 1963, 10, 232-236.

Wapner, S., & Alper, T. G. The effect of an audience on behavior in a choice situation. Journal of Abnormal and Social Psychology, 1952, 47, 222-229.

Yenawine, G., & Arbuckle, D. S. Study of the use of videotape and audiotape as techniques in counselor education. Journal of Counseling Psychology, 1971, 18, 1-6.

Footnote

1. The author wishes to express his gratitude to Drs. Bruce Fretz, Thomas Magoon and Mary Faith Tanney for their thoughtful critiques of an earlier version of this paper.